

POLICE DEPARTMENT  
BALTIMORE, MARYLAND

☐ Person ☐ Property ☐ Vehicle ☒ Miscellaneous

☐ Domestic Related ☐ Gang Related ☐ Juvenile Related ☐ Hate Crime

6 Unit 5815	7 Post of Occurrence 515	8 Reporting Area	9 Street Code	10 CAD Number 1080	11 Crime / Incident Dog Bite	12 Complaint Number 05H12334
13 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed					14 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	
15 Follow-up <input type="checkbox"/> Yes <input type="checkbox"/> No					16 Crime Code	
17 Crime Classification					18 Describe Location of Offense or Type of Premise 3200 Barclay St	
19 Reported by Crime Watcher <input type="checkbox"/> Yes <input type="checkbox"/> No					20 Date / Time Occurred 8/25/12 0955 Hrs	
21 Date / Time Reported 8/25/12 0958					22 Companion Report No	

23 Complainant / Victim [Redacted]	24 Sex F	25 Race W	26 Age 21	27 Where Employed or School Attending (Include City Located)	28 Occupation	29 Hours of Employment	30 Phone	31 Sobriety SoB
21 Injuries and Location on Body Left leg & Left Arm				22 Victim's Condition Good		23 Victim Hospitalized Facility <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		24 Victim / Assailant Relationship Unions Memorial
25 Reporting Person Same ASH 20				26 Sex Race Age DOB		27 Address (Include City, County, State, Zip)		28 Residence Phone Other Phone

29 Witness Parent/Guardian <input checked="" type="checkbox"/>	30 Name (Last, First, MI) [Redacted]	31 Address (Include City, County, State, Zip)	32 Sex Race Age DOB	33 Height	34 Weight
35 Complexion	36 Hair Color/Length/Style	37 Hat	38 Eyes	39 Facial Hair	40 Teeth
41 Shirt/Coat	42 Shoes	43 Additional Descriptors (Tattoos, Piercings, Scars, Marks, Accent, etc)			44 Arrest Number

45 Trademarks of Suspect(s) (Action / Conversation)	46 Point of Entry	47 Location Last Seen	48 Manner of Escape	49 Direction of Escape
50 Weapon / Means of Attack	51 Method Used to Commit Crime	52 Type of Property Taken	53 Total Loss Value	

54 Vehicle Information <input type="checkbox"/> Suspect <input type="checkbox"/> Victim <input type="checkbox"/> Stolen <input type="checkbox"/> Towed <input type="checkbox"/> Other	55 Tag Number	56 State	57 Expiration	58 Vehicle Year Make	59 Model	60 Body Style Color	61 Mileage
54 Vehicle Identification Number (VIN)				55 Ignition Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	56 Keys in Ignition <input type="checkbox"/> Yes <input type="checkbox"/> No	57 Doors Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	58 Windows Closed <input type="checkbox"/> Yes <input type="checkbox"/> No
59 Radio in Car <input type="checkbox"/> Yes <input type="checkbox"/> No				60 Battery in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	61 Spare Tire in Car <input type="checkbox"/> Yes <input type="checkbox"/> No	62 Trunk Locked <input type="checkbox"/> Yes <input type="checkbox"/> No	63 Registered Owner Name (Last, First, MI)

64 Sex Race Age DOB	65 Address (Include City, County, State, Zip)
66 Recovered by	67 Method of Theft
68 Evidence of Strapping / Tampering	69 Repo Check <input type="checkbox"/> Yes <input type="checkbox"/> No
70 Tow List Check <input type="checkbox"/> Yes <input type="checkbox"/> No	71 Owner Notified <input type="checkbox"/> Yes <input type="checkbox"/> No

72 Tow Information	73 Location Towed From	74 Location Towed To	75 Towed by	76 Tow Truck Operator Signature
77 Detective Notified	78 Sequence No. Assignment	79 Unit Number	80 Date	81 Time
82 Crime Lab Technician Name	83 Unit Number	84 Time	85 Hot Desk Person Notified	86 Time
87 Communications Supervisor Notified <input type="checkbox"/> Yes <input type="checkbox"/> No	88 Citywide Broadcast Time <input type="checkbox"/> Yes <input type="checkbox"/> No	89 Victim Assistance/Incident Information Explain Form(s) Provided <input type="checkbox"/> Yes <input type="checkbox"/> No		

90 Copies Forwarded To

91 Cont'd Sections	92 Narrative (1) Continuation of any preceding items (2) Property Listing to include property taken and seized/submitted evidence/property, list property inventory number(s) when applicable (3) Describe details of incident. Include all steps taken in preliminary investigation (4) List all additional notifications, including name, agency or assignment unit number, telephone number, date, time (5) List all arrests, including Arrest Numbers and charges
<p>On 8/25/12 at approx 0958 Hrs this officer responded to the 3200 Blk of Barclay St for a dog bite. Upon arrival this officer spoke to [Redacted] who advised that she was attacked by a Blk. rottweiler dog, while at the farmers market located in the</p>	

93 Reporting Officer Name (PRINT CLEARLY) Curtis Brown	94 Sequence No. Assignment 6676 NO	95 Signature [Signature]
96 Approving Supervisor Rank and Name DIC WILDER	97 Sequence No. Assignment 1406 NO	98 Signature James Shields
99 RMS Data Entered By	100 Sequence No Date	101 Time
102 Reviewer	103 Referred To	

REPORT SHOULD BE TYPED OR LEGIBLY PRINTED IN BLACK INK



POLICE DEPARTMENT  
BALTIMORE, MARYLAND

1 Crime / Incident <b>Dog Bite</b>		Attempt <input type="checkbox"/>	2 Complaint Number <b>125H12334</b>
3 Location of Offense / Incident (Street Address, Zip) <b>3200 Blk Barclay ST</b>		Page <b>2</b> of <b>3</b>	
4 Date / Time of This Report <b>8/25/12 0958 Hrs</b>		5 Arrest / Custody Number	
11 Original Report Date / Time <b>8/25/12 0958 Hrs</b>		12 Offense / Incident Changed From	
16 Follow-up <input type="checkbox"/> Yes <input type="checkbox"/> No		17 Crime Code	18 Crime Classification

☐ Continuation ☐ Follow Up

Person ☐ Property ☐ Miscellaneous ☒ Vehicle ☐ Missing Person ☐ Custody ☐

6 Unit <b>5815</b>	7 Post of Occurrence <b>SIX</b>	8 Reporting Area	9 Street Code	10 CAD Number <b>1080</b>
13 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed	14 Multiple Clearance <input type="checkbox"/> Yes <input type="checkbox"/> No	15 Case Disposition <input checked="" type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Explain	

19 Complainant / Victim [REDACTED]	Sex [REDACTED]	Race [REDACTED]	Age <b>W 21</b>
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Cent'd Section: Narrative: (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property, list property inventory number(s) when applicable. (3) Record all activity and all developments in case subsequent to last report. Include names and arrest numbers of all persons arrested. Explain any crime/incident classification change. (4) List of additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

**3200 Blk of Barclay ST.**

Investigation revealed that on 8/25/12 at approx 0955 hrs [REDACTED] and her roommate [REDACTED] was walking s/b on the east side of the street in the 3200 Blk of Barclay ST, when they noticed a black rottweiler tied to a parking meter and unattended. They both advised as they got closer to the dog while walking on the side walk the dog became more aggressive lunging at them. While the dog was lunging at them it broke loose from the leash that was used to tie it to the parking meter. Once loose the dog attacked [REDACTED] biting her several times on her left leg and left hand. Medical personnel responded, treated [REDACTED] and transported her to Union Memorial Hospital for treatment.

Further Investigation also revealed that the dog owner Omar McBee (DOB 10/21/71 6'00" 160 lbs) tied the his rottweiler to the parking meter and went into the farmers market to shop. While leaving the dog unattended. Mr McBee was issued civil citation # 4734236851 for leaving a dangerous animal unattended. Animal Control was requested and Officer Johnson unit #440 responded. Officer Johnson verified that the dog had all his shots and that they were current. Officer Johnson also issued a citation for an unleashed dog and released the dog back to Mr. McBee. P/O Johnson advised that he will be conducting a follow up. Mr. [REDACTED] advised that life threatening and was issued a form 309.

21 I affirm and declare that the statements above are true to the best of my knowledge:		Reporting Person's Signature <b>[Signature]</b>	Date <b>[Blank]</b>
22 Reporting Officer Name (PRINT CLEARLY) <b>[Signature]</b>	Sequence No. Assignment <b>G646 NO</b>	Signature <b>[Signature]</b>	
23 Approving Supervisor Rank and Name <b>ALC WILDER</b>	Sequence No. Assignment <b>NO</b>	Signature <b>[Signature]</b>	
24 RMS Data Entered By	Sequence No. Date Time	25 Reviewer	26 Referred To

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☒ Continuation

☐ Follow Up

Person ☐ Property ☐ Miscellaneous ☒ Vehicle ☐ Missing Person ☐ Custody ☐

1 Crime / Incident Dog Bite	Attempt <input type="checkbox"/>	2 Complaint Number 125H12334
3 Location of Offense / Incident (Street Address, Zip) 3200 Blk Barclay St	Page 3 of 3	
4 Date / Time of This Report 8/25/12 0958	5 Arrest / Custody Number	
11 Original Report Date / Time 8/25/12 0958	12 Offense / Incident Changed From	
13 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed	14 Multiple Clearance <input type="checkbox"/> Yes <input type="checkbox"/> No	15 Case Disposition <input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared
16 Follow-up <input type="checkbox"/> Yes <input type="checkbox"/> No		17 Crime Code
		18 Crime Classification

6 Unit  
SBIS

7 Post of Occurrence  
SIS

8 Reporting Area

9 Street Code

10 CAD Number  
1680

13 Case Status  
☐ Open ☐ Closed

14 Multiple Clearance  
☐ Yes ☐ No

15 Case Disposition  
☐ Cleared ☐ Not Cleared

Explain

16 Follow-up  
☐ Yes ☐ No

17 Crime Code

18 Crime Classification

19 Complainant / Victim  
[Redacted]

Residence / Address (Include City, County)  
[Redacted]

Sex Race Age DOB  
[Redacted]

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Conf'd Sections Narrative (1) Continuation of any preceding items. (2) Property Listing, to include property taken and seized/submitted evidence/property, list property inventory number(s) when applicable. (3) Record all activity and all developments in case subsequent to last report. Include names and arrest numbers of all persons arrested. Explain any crime/incident classification change. (4) List all additional notifications, including name, agency or assignment, unit number, telephone number, date, time. (5) Recommend case status when applicable. (6) If Multiple Clearance, include all affected complaint/case numbers.

The dog was released back to the owner due to the meeting all the criteria required by animal control. A copy of this report was also faxed to Officer Johnson

Continued ☐

21 I affirm and declare that the statements above are true to the best of my knowledge: Reporting Person's Signature Date

22 Reporting Officer Name (PRINT CLEARLY)  
Curtis B. [Redacted]

Sequence No. Assignment  
6676 N7

Signature  
[Signature]

23 Approving Supervisor Rank and Name  
OIC Winder

Sequence No. Assignment  
FAB N4

Signature  
James J. Alder

24 RMS Data Entered By Sequence No. Date Time 25 Reviewer 26 Referred To

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